

1. The following data items are required for all registerable births (including live births before 24 weeks of gestation and stillbirths after 24 weeks of gestation) that took place in your trust (including home births) between 1st April 2012 and 31st March 2013.

2. The data are required at the level of ONE ROW PER BABY (i.e. 2 rows for twins, 3 rows for triplets etc). In the case of multiple births, the maternal information (demographics, obstetric history, antenatal care) should be identical but neonatal information (e.g. mode of delivery, birth weight) may differ.

3. Preferred formats for the output are detailed below in Column C. These are largely based on national code definitions; however, if your system captures data in a different format or uses an alternative coding system, you do not need to re-code the data. Please simply send the raw data extract together with a data dictionary or similar to enable us to interpret the data.

4. If possible, please save the extract as a comma-separated value (CSV) file. For fields with multiple, non mutually-exclusive options (highlighted in green), please use a different delimiter (e.g. ; or |) to separate data items within a field.

5. The data extract must be transferred securely in an encrypted format as per the Data Sharing Agreement. Please contact Lynn Copley on 020 7869 6609 / [lcopley@rcseng.ac.uk](mailto:lcopley@rcseng.ac.uk) to discuss data transfer options.

6. If you have any queries regarding these instructions please contact Hannah Knight on 020 7772 6472 / [hknight@rcog.org.uk](mailto:hknight@rcog.org.uk)

The preferred format of the data item is expressed in data type and length.

The data type is represented in either alphanumeric or numeric form. i.e.:

- an - indicating an alphanumeric data item
- n - indicating a numeric data item

The length is expressed in a numeric form e.g. 6, which would indicate a data item that captures 6 characters (Note - spaces are counted as characters).

In some cases, the length is preceded with 'MAX' to indicate that the length is variable but has an upper limit. For instance a format of 'max Examples of formats are:

- an2 - a data item in an alphanumeric format which captures 2 characters.
- max an2 - a data item in an alphanumeric format which captures a maximum of 2 characters.
- n3 - a data item in a numeric format which captures 3 numeric characters
- an7 - n:nnnnnn - a data item in an alphanumeric format with specific data types for each character. Barring the second character, all characters are numeric. The second character is alphanumeric.
- n.nn - a data item in a numeric format which captures three numeric characters separated by a full stop (after the first character).

DATE and DATE TIME data items are in alphanumeric format, however, the format of these data items also explain the specific form of each character. i.e.:

- an10 - CCYY-MM-DD  
CCYY denotes the year. MM denotes the month and DD denotes the day in the month.
- an19 - YYYY-MM-DDThh:mm:ss  
YYYY denotes the year. MM denotes the month and DD denotes the day in the month.  
T is a prefixed value denoting that the subsequent characters relate to time (i.e. trusts will submit the letter T).  
hh denotes the hour, mm denotes the minute and ss denotes the second.

Data item	Description	Format
<b>DEMOGRAPHICS</b>		
Mother's NHS number	The NHS Number of the mother in a maternity episode	n10 (nnnnnnnnnn)
Postcode	The postcode of usual address, as nominated by the mother	max an8
Mother's date of birth	Date of birth of the mother in a maternity episode	Preferred format: an10 (CCYY-MM-DD)
Mother's ethnicity	The ethnicity of the mother in a maternity episode as specified by herself	Preferred categories and codes listed below (based on 2001 census). If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  <div> <b>White</b>  A - White British  B - White Irish  C - Any other White background  <b>Mixed</b>  D - White and Black Caribbean  E - White and Black African  F - White Asian  G - Any other Mixed background  <b>Asian or Asian British</b>  H - Indian  J - Pakistani  K - Bangladeshi  L - Any other Asian Background  <b>Black or Black British</b>  M - Caribbean </div>

		N - African P - Any other Black background <b>Other Ethnic Groups</b> R - Chinese S - Any other ethnic group Z - Not Stated 99 - Not known
<b>Father's ethnicity</b>	The ethnicity of the father as specified by himself, or by the mother if the father is not present	Preferred categories and codes listed below (based on 2001 census). If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data. <b>White</b> A - White British B - White Irish C - Any other White background <b>Mixed</b> D - White and Black Caribbean E - White and Black African F - White Asian G - Any other Mixed background <b>Asian or Asian British</b> H - Indian J - Pakistani K - Bangladeshi L - Any other Asian Background <b>Black or Black British</b> M - Caribbean N - African P - Any other Black background <b>Other Ethnic Groups</b> R - Chinese S - Any other ethnic group Z - Not Stated 99 - Not known
<b>OBSTETRIC HISTORY</b>		
<b>Gravida</b>	Number of previous pregnancies (including miscarriages and abortions)	max n2
<b>Parity</b>	Number of previous registerable births (any birth >24 weeks of gestation, or with any signs of life)	max n2
<b>Caesarean section</b>	Has the mother delivered any previous baby by caesarean section?	Preferred format: N = no; Y = yes
<b>Instrumental delivery</b>	Were any of the woman's previous babies delivered with instrumental assistance?	Preferred format: N = no; Y = yes
<b>Preterm birth</b>	Were any of the woman's previous babies born before 37 completed weeks of gestation?	Preferred format: N = no; Y = yes
<b>Low birth weight</b>	Did any of the woman's previous babies weight less than 2500g at birth?	Preferred format: N = no; Y = yes
<b>Stillbirth</b>	Has the woman ever had a stillbirth (intrauterine fetal death after 24 completed weeks of gestation)?	Preferred format: N = no; Y = yes
<b>Pre-eclampsia, eclampsia</b>	Did the woman have preeclampsia or eclampsia during any previous pregnancy?	Preferred format: N = no; Y = yes
<b>Placenta accreta</b>	Did the woman have placenta accreta during any previous pregnancy?	Preferred format: N = no; Y = yes
<b>ANTENATAL CARE</b>		
<b>Assisted conception</b>	Did the mother conceive through a method of assisted conception (e.g. IVF/IUI)	Preferred format: N = no; Y = yes
<b>Date of LMP</b>	Date of the last menstrual period as reported by the mother (if known)	Preferred format: an10 (CCYY-MM-DD)
<b>Gestation at booking</b>	Estimated gestational age at booking in days	max n3
<b>Maternal weight at booking</b>	The weight of the mother in kilograms at the Booking Appointment	maxn3.maxn3
<b>Maternal height</b>	The height of the mother in metres	n1.maxn2
<b>BMI at booking</b>	The body mass index of the mother at the Booking Appointment	n2.n1
<b>Smoking status at booking</b>	The mother's self-reported smoking status at the Booking Appointment	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data. 01 - Current smoker 02 - Ex-smoker - Stopped after conception 03 - Ex-smoker - Stopped between conception and 12 months before conception 04 - Ex-smoker - Stopped more than 12 months before conception 05 - Non-smoker - history unknown 06 - Never smoked 09 - Unknown
<b>Alcohol (units per week)</b>	The typical number of units of alcohol the mother drinks, per week, as reported at the Booking Appointment	max n3
<b>Confirmed EDD</b>	The Estimated Date of Delivery, as agreed by ultrasound scan, LMP or Clinical Assessment	Preferred format: an10 (CCYY-MM-DD)
<b>Antenatal complications/diagnoses</b>	Any obstetric condition/s diagnosed in this pregnancy	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data. 01 - Severe pre-eclampsia requiring pre-term birth 02 - Haemolytic anaemia, elevated liver enzymes and Low platelet count (HELLP) 03 - Eclampsia 05 - Liver cholestasis of pregnancy 06 - Gestational diabetes mellitus 07 - Gestational hypertension 08-Gestational proteinuria 09 - Antepartum haemorrhage 11 - Feto-maternal haemorrhage 18 - Symphysis pubis dysfunction 19 - Placenta praevia 20 - Severe pre-eclampsia
<b>Group B Streptococcus screening</b>	Was the mother screened for Group B Streptococcus?	Preferred format: N = no; Y = yes
<b>Pre-existing clinical conditions</b>	As identified at the Booking Appointment and based on the woman's past medical history, the diagnosis or type of diagnosis presenting a risk or complicating factor for this pregnancy	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data. 01 - Hypertension 02 - Cardiac disease 03 - Renal disease 04 - Mental health disorder 05 - Thromboembolic disorder

		06 - Haematological disorder 07 - Central nervous system disorder 08 - Diabetes 09 - Autoimmune disease 10 - Cancer 12 - Infectious hepatitis A 13 - Serum Hepatitis B 14 - Hepatitis C 16 - Endocrine disorder 17 - Respiratory disease 18 - Gastrointestinal disorder 19 - Musculoskeletal disorder 20 - Gynaecological problems
Intended delivery location	Planned place of delivery (type)	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  0 - In NHS hospital - delivery facilities associated with midwife ward 1 - At a domestic address 2 - In NHS hospital - delivery facilities associated with consultant ward 3 - In NHS hospital - delivery facilities associated with GMP ward 4 - In NHS hospital - delivery facilities associated with consultant/GMP/midwife ward inclusive of any combination of two of the professionals mentioned 5 - In private hospital 6 - In other hospital or institution 7 - In NHS hospital - ward or unit without delivery facilities 8 - None of the above 9 - Not known
<b>LABOUR AND DELIVERY</b>		
Actual delivery location	Location in which baby was delivered	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  0 - In NHS hospital - delivery facilities associated with midwife ward 1 - At a domestic address 2 - In NHS hospital - delivery facilities associated with consultant ward 3 - In NHS hospital - delivery facilities associated with GMP ward 4 - In NHS hospital - delivery facilities associated with consultant/GMP/midwife ward inclusive of any combination of two of the professionals mentioned 5 - In private hospital 6 - In other hospital or institution 7 - In NHS hospital - ward or unit without delivery facilities 8 - None of the above 9 - Not known
Transferred in	Was the woman transferred to this unit for her antenatal care, labour or delivery (as opposed to booking at this hospital)?	Preferred format: N = no; Y = yes
Smoking status at delivery	The mother's self-reported smoking status at delivery	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - Current smoker 02 - Ex-smoker - Stopped after conception 03 - Ex-smoker - Stopped between conception and 12 months before conception 04 - Ex-smoker - Stopped more than 12 months before conception 05 - Non-smoker - history unknown 06 - Never smoked 09 - Unknown
Number of infants this delivery	Number of registerable infants delivered	n1
Onset of labour	The method used to induce (initiate) labour, rather than to accelerate it.	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  1 - Spontaneous: the onset of regular contractions whether or not preceded by spontaneous rupture of the membranes 2 - Not applicable: caesarean section carried out prior to onset of labour or immediately following the onset of labour, when the decision was made before labour 3 - Surgical induction by amniotomy 4 - Medical induction, including the administration of agents either orally, intravenously or intravaginally with the intention of initiating labour 5 = Combination of surgical induction and medical induction 9 = Not known
Type of medical induction (if applicable i.e. Option 4 in the previous question)	The agent used for medical induction of labour	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - Mifepristone 02 - Misoprostol 03 - Prostaglandin 04 - Oxytocin 05 - Unknown
Labour augmentation		Preferred format: N = no; Y = yes
Time of onset of established labour	Date/time when established labour is confirmed - regular painful contractions and progressive cervical dilatation	Preferred format: an19 YYYY-MM-DDThh:mm:ss
Time of onset of second stage	Signs or evidence of full dilatation of cervix	Preferred format: an19 YYYY-MM-DDThh:mm:ss
Anaesthesia in labour and delivery	Type of anaesthesia used within the labour & delivery episode	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - General anaesthetic 02 - Epidural or caudal anaesthetic 03 - Spinal anaesthetic 09 - Pudendal block anaesthetic 97 - Other anaesthetic or analgesic only 98 - No anaesthetic administered
ECV before labour	Was external cephalic version performed before the onset of labour?	Preferred format: N = no; Y = yes
Lead maternity care professional	The professional category of the clinician with overall responsibility for care during the pregnancy	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  060 - Consultant Obstetrician 160 - General medical practitioner 170 - Midwife
Senior person present at delivery	The professional category of the most senior clinician present during the delivery	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  060 - Consultant Obstetrician 160 - General medical practitioner 170 - Midwife
Presentation at onset of labour/delivery	The presentation of the fetus at onset of labour/delivery	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - Cephalic 02 - Breech 03 - Transverse/oblique 04 - Not known XX - Other

Method of delivery	The method for delivering baby	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  0 - Spontaneous Vertex 1 - Spontaneous Other Cephalic 2 - Low forceps, not breech 3 - Other Forceps, not breech 4 - Ventouse, Vacuum extraction 5 - Breech 6 - Breech Extraction 7 - Elective caesarean section 8 - Emergency caesarean section 9 - Other
Perineal tears	Whether or not there was a traumatic lesion of the genital tract	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - None 02 - Labial tear 03 - Vaginal wall tear 04 - Perineal tear - first degree 05 - Perineal tear - second degree 06 - Perineal tear - third degree 07 - Perineal tear - fourth degree 09 - Cervical tear 10 - Urethral tear 11 - Clitoral tear 12 - Anterior incision
Episiotomy	Whether or not an episiotomy was performed	Preferred format: N = no; Y = yes
Maternal critical incident	Instance of a critical incident occurring	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - Undiagnosed breech 02 - PPH >=500ml and <=999ml 03 - PPH >= 1000ml and <=1499ml 04 - PPH >= 1500ml 05 - Return to theatre 06 - Hysterectomy / laparotomy 07 - Anaesthetic complications 08 - Intensive care admission 09 - Venous thromboembolism 10 - Pulmonary embolism 11 - Unsuccessful forceps or ventouse
Date and time of birth	Date and time of birth of the baby	Preferred format: an19 YYYY-MM-DDThh:mm:ss
Delivery outcome	Outcome of delivery	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  10 - Live birth 20 - Stillbirth 30 - Miscarriage 40 - Termination of Pregnancy < 24weeks 50 - Termination of Pregnancy >= 24weeks XX - Other inc vanishing/papraceous twin, ectopic
Birth weight	Weight of the baby at birth in grams	max n4
Gestational age	Gestation at date of birth in days	max n3
Birth order	Sequence in which the baby was born (if multiple)	n1
Sex of baby	Sex of the baby	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  0 - Not Known (not recorded) 1 - Male 2 - Female 9 - Not Specified
Cord blood gases	pH of umbilical (venous) blood sample	n.n2
Apgar score at 1 minute	The Apgar score of the neonate 1 minute after delivery	max n2
Apgar score at 5 minutes	The Apgar score of the neonate 5 minutes after delivery	max n2
Apgar score at 10 minutes	The Apgar score of the neonate 10 minutes after delivery	max n2
Baby's NHS number	The NHS Number of the baby	n10 (nnnnnnnnnn)
Neonatal procedures/diagnoses	A neonatal diagnosis, as captured to the point of the baby's discharge from maternity services or neonatal services	Preferred categories and codes listed below. If these are not the categories recorded in your MIS, please provide any relevant information needed to interpret your data.  01 - Shoulder dystocia 02 - Cord prolapse 03 - Acute fetal compromise 04 - Fetal acidemia 05 - Meconium Aspiration Syndrome 06 - Acute blood loss 07 - Jaundice requiring phototherapy 08 - Erb's Palsy 09 - Neonatal abstinence syndrome 10 - Birth trauma to the newborn 11 - Fetal laceration at caesarean section 12 - Cord pH < 7.1 venous 13 - Neonatal seizures 14 - Undiagnosed fetal abnormality 15 - European Congenital Anomalies or Twins (Eurocat)
Date admitted to NICU/SCBU, if applicable	Date/time on which baby was admitted to Neonatal Unit (NNU)	Preferred format: YYYY-MM-DDThh:mm:ss
Antibiotic treatment for Group B Streptococcus	Was antibiotic treatment given to the neonate for Group B Streptococcus?	Preferred format: N = no; Y = yes
<b>DISCHARGE</b>		
Maternal Death	Date/time of death of mother during the antenatal, intrapartum and postpartum periods. The postpartum period only covers death to the point the woman gets discharged from maternity services.	Preferred format: YYYY-MM-DDThh:mm:ss
Neonatal Death	Date and time of death of baby, before 28 completed days of birth	Preferred format: YYYY-MM-DDThh:mm:ss
Date of maternal discharge	Date that the mother is discharged home	Preferred format: an10 (CCYY-MM-DD)
Date of neonatal discharge	Date that the neonate is discharged home	Preferred format: an10 (CCYY-MM-DD)